

07-29-05

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# AMENDMENT TRANSMITTAL LETTER

Docket No.  
58069-CON (47126)

Application No.  
09/887,493-Conf. #7718

Filing Date  
June 22, 2001

Examiner  
S. D. Coe

Art Unit  
1654

Applicant(s): Gregor Cevc

Invention: IMPROVED FORMULATION FOR TOPICAL NON-INVASIVE APPLICATION IN VIVO

## TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	28	- 55 =		x	
Independent Claims	1	- 3 =		x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within third month					1,020.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					1,020.00

☒ Large Entity

☐ Small Entity

☐ No additional fee is required for this amendment.

☒ Please charge Deposit Account No. 04-1105 in the amount of \$ 1,020.00.  
A duplicate copy of this sheet is enclosed.

☐ A check in the amount of \$ \_\_\_\_\_ to cover the filing fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director is hereby authorized to charge and credit Deposit Account No. 04-1105 as described below. A duplicate copy of this sheet is enclosed.

☒ Credit any overpayment

☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.

Dated: July 27, 2005

Lisa Swiszc Hazzard  
Attorney Reg. No.: 44,368

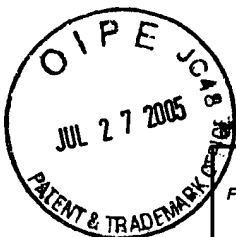
EDWARDS & ANGELL, LLP  
P.O. Box 55874  
Boston, Massachusetts 02205  
(617) 439-4444

### Certificate of Express Mailing

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV654385901US, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: July 27, 2005

Signature: Lakeisha Bryant (Lakeisha Bryant)



PTO/SB/17 (12-04v2)

Approved for use through 7/31/2006. OMB 0651-0032  
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<b>Effective on 12/08/2004.</b> Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <b>FEE TRANSMITTAL</b> <b>For FY 2005</b>		<b>Complete if Known</b>	
		Application Number	09/887,493-Conf. #7718
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	June 22, 2001
<b>TOTAL AMOUNT OF PAYMENT</b> (\$)		First Named Inventor	Gregor Cevc
		Examiner Name	S. D. Coe
1,020.00		Art Unit	1654
		Attorney Docket No.	58069-CON (47126)

**METHOD OF PAYMENT** (check all that apply)

<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: <b>04-1105</b>		Deposit Account Name: <b>Edwards &amp; Angell, LLP</b>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)				
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee			
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments			

**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>
28	- 55 =	x =
<b>Fee Paid (\$)</b>		
<b>Multiple Dependent Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>
1	- 3 =	x =
<b>Fee Paid (\$)</b>		

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
	- 100 =	/50	(round up to a whole number) x	=

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge): 1253 Extension for response within third month	1,020.00
<b>Fees Paid (\$)</b>	

<b>SUBMITTED BY</b>			
Signature		Registration No. (Attorney/Agent)	44,368
Name (Print/Type)	Lisa Swiszc Hazzard	Telephone	(617) 439-4444
		Date	July 27, 2005

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Dated: July 27, 2005

Signature:

(Lakeisha Bryant)